Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 1 of 59

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF OKLAHOMA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Ch am

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Camille First name Jo Middle name Johnson Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Last hame and Samx (St., St., II, III)	Last Harris and Samx (St., St., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Camille Johnson FKA Camille Robinson FKA Camille Jackson	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0600	

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Case number (if known)

Debtor 1 Camille Jo Johnson

		About Debtor 1:	4	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Е	Business name(s)			
		EINs	E	EINs			
5.	Where you live		If	f Debtor 2 lives at a different address:			
		5205 Shalimar Dr Oklahoma City, OK 73135					
		Number, Street, City, State & ZIP Code	N	Jumber, Street, City, State & ZIP Code			
		Oklahoma County	C	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	i	f Debtor 2's mailing address is different from yours, fill it n here. Note that the court will send any notices to this nailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	N	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	C	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Camille Jo Johnson Case number (if known)

•	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	choosing to file under	■ Ch	apter 7								
		☐ Ch	apter 11								
		☐ Ch	apter 12								
		☐ Ch	apter 13								
i_	How you will pay the fee	-	about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with					
			I request that but is not rec applies to yo	at my fee be wa juired to, waive y ur family size ar	lived (You may request this option your fee, and may do so only if you do you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.					
		'	ше Арріісай	on to riave the C	Snapter 7 Filling Fee Walved (Office	iari omi 1035) and me it with your petition.					
	Have you filed for bankruptcy within the	■ No.									
	last 8 years?	☐ Yes									
			District			Case number					
			District		When	Case number					
			District		When	Case number					
0.	Are any bankruptcy cases pending or being	■ No									
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	S.								
			Debtor			Relationship to you					
			District		When	Case number, if known					
			Debtor			Relationship to you					
			District		When	Case number, if known					
1.	Do you rent your	□ No.	Go to	line 12.							
	residence?	_	l loo w	our landlord obta	ained an eviction judgment agains	t you?					
		■ Yes	s. ■	No. Go to line	, ,	•					
				Yes. Fill out In.		Judgment Against You (Form 101A) and file it with this					

Case number (if known) Debtor 1 Camille Jo Johnson Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. Go to Part 4. of any full- or part-time business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Camille Jo Johnson Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 6 of 59 Debtor 1 Case number (if known) Camille Jo Johnson Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Camille Jo Johnson Signature of Debtor 2 Camille Jo Johnson Signature of Debtor 1 Executed on April 8, 2019 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Camille Jo Johnson Case number (if known)

For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Warren Alarkon Signature of Attorney for Debtor	Date	April 8, 2019 MM / DD / YYYY
Warren Alarkon 22469		
Stevenson-Kim Alarkon PLLC		
1415 NW 43rd St Oklahoma City, OK 73118		
Number, Street, City, State & ZIP Code		
Contact phone 405 702 7795	Email address	info@skafirm.com
22469 OK Bar number & State		_

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	41.16						
Fill ir	this inform	ation to identify your	case:				
Debte	or 1	Camille Jo Johnso	N Middle Name	Last Name			
Debto (Spous	or 2 e if, filing)	First Name	Middle Name	Last Name			
Unite	d States Ban	kruptcy Court for the:	WESTERN DISTRICT C	OF OKLAHOMA			
Case	number						
(if knov						_	if this is an
						ameno	ded filing
∩ffi	cial For	m 106Sum					
			and Liabilities an	d Certain Statistical Inform	nation		12/15
inforn your o	nation. Fill or original form	ut all of your schedules, you must fill out a	es first; then complete th	are filing together, both are equally respection on this form. If you are filing the box at the top of this page.			
Part '	Summa	rize Your Assets					
						Your as	ssets f what you own
1.	Schedule A/I	B: Property (Official Fo	orm 106A/B)			c	70,000.00
						\$	·
	1b. Copy line	62, Total personal pro	perty, from Schedule A/B			\$	17,972.99
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	87,972.99
Part 2	2: Summa	rize Your Liabilities					
							abilities t you owe
•	0 / / / 0	0 12 1411 11 0		(0%:15 1000)		Amoun	you owe
			aims Secured by Property nn A, Amount of claim, at t	(Official Form 106D) he bottom of the last page of Part 1 of Scho	edule D	\$	13,880.00
			Unsecured Claims (Official 1 (priority unsecured claims	Form 106E/F) s) from line 6e of <i>Schedule E/F</i>		\$	6,720.30
	3b. Copy the	total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j of Schedule E/F		\$	85,187.88
				Your total	liabilities	\$	105,788.18
Part 3	3: Summa	rize Your Income and	Expenses				
		our Income (Official Fo		I		\$	4,129.33
		Your Expenses (Official onthly expenses from li				\$	3,862.95
Part 4	4: Answer	These Questions for	Administrative and Stati	stical Records			
	•		er Chapters 7, 11, or 13? on this part of the form. Ch	neck this box and submit this form to the co	urt with yo	ur other sch	nedules.
7.	■ Yes What kind of	f debt do you have?					
				lebts are those "incurred by an individual prg for statistical purposes. 28 U.S.C. § 159.	imarily for	a personal,	family, or
		ebts are not primarily t with your other sched		re nothing to report on this part of the form.	Check this	box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Camille Jo Johnson Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____4,622.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,720.30
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	49,790.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	56,510.30

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	Cas	0. 10 11000		00. 1 Tiled. 0-	1700/10	ago. 10	01 00		
Fill in this info	ormation to identify	your case and th	is filinç	j:					
Debtor 1	Camille Jo Jo	hnson							
D 17 0	First Name	Middle	Name	Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name					
United States I	Bankruptcy Court for	the: WESTERN	DISTR	ICT OF OKLAHOMA					
Case number									Check if this is an amended filing
Official E	orm 106A/B								
-	ıle A/B: Pı	-							12/15
think it fits best. information. If m Answer every qu	Be as complete and a ore space is needed, a sestion.	accurate as possibl attach a separate sl	e. If two neet to t	only once. If an asset fits married people are filing his form. On the top of any Estate You Own or Have	together, both are y additional pages	equally resp	onsible for su	ıpply	ing correct
□ No. Go to F	, , ,	uitable interest in a	ny resid	ence, building, land, or si	milar property?				
	alimar Dr ss, if available, or other des	cription	What	is the property? Check all to Single-family home Duplex or multi-unit building Condominium or cooperate	ng	the amount	of any secure	d clai	or exemptions. Put ms on Schedule D: ecured by Property.
Oklahom	na City OK State	73135-0000 ZIP Code		Manufactured or mobile h Land Investment property Timeshare Other	ome	Describe t	perty? 70,000.00 he nature of y	po our c	strent value of the rtion you own? \$70,000.00
011.1			Who	has an interest in the prop Debtor 1 only	perty? Check one		e), if known.	ancy	by the entireties, or
County	na .			Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors information you wish to	s and another add about this iter	(see ins	x if this is con structions) cal	nmun	ity property
				erty identification number al Description OAKCL		ock: 028 Lo	ot 002		
pages you	ollar value of the po I have attached for be Your Vehicles	ortion you own fo Part 1. Write that	r all of numbe	your entries from Part r here	1, including any	entries for	=>		\$70,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1 _C	amille Jo Johnson		Case number (if known)	
3.	Cars, vans,	trucks, tractors, sport utilit	ty vehicles, motorcycles		
	□ No				
	Yes				
3	3.1 Make: Model: Year:	Cheverolet Suburban LT 2013	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only	the amount of any	ured claims or exemptions. Put secured claims on Schedule D: ve Claims Secured by Property.
	Other inf	nate mileage: 11600	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
_	Locatio Oklaho	GNSKKE74DR126150 on: 5205 Shalimar Dr, ma City OK 73135 ood value used	Check if this is community property (see instructions)	\$15,294 	1.00 \$15,294.00
	No No Yes	ollar value of the portion you	al watercraft, fishing vessels, snowmobiles, motorcyc	g any entries for	\$15,294.00
		be Your Personal and Househo or have any legal or equitab	old Items le interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		goods and furnishings Major appliances, furniture, lin scribe	nens, china, kitchenware		·
		Location: 520 used furnitur	05 Shalimar Dr, Oklahoma City OK 73135 e		\$1,200.00
7.		Televisions and radios; audio including cell phones, camera	, video, stereo, and digital equipment; computers, pr as, media players, games	inters, scanners; music c	ollections; electronic devices
			05 Shalimar Dr, Oklahoma City OK 73135 phone, tv, used		\$500.00
8.	_		ngs, prints, or other artwork; books, pictures, or other a, collectibles	r art objects; stamp, coin,	or baseball card collections;
	■ No □ Yes. De	scribe			
9.	Examples:	for sports and hobbies Sports, photographic, exercis musical instruments	e, and other hobby equipment; bicycles, pool tables,	golf clubs, skis; canoes	and kayaks; carpentry tools;
	Yes. De	scribe			

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Official Form 106A/B Schedule A/B: Property page 2

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Del	otor 1 <u>Camille Jo</u>	Johnson			Case number (if known)	
		Location: 5205 Shalima used sports equipment	r Dr, Oklahoı	ma City OK 73135		\$50.00
ı	Firearms Examples: Pistols, r No Yes. Describe	fles, shotguns, ammunition, and	d related equip	ment		
[Clothes Examples: Everyday No Yes. Describe	v clothes, furs, leather coats, de	signer wear, sl	hoes, accessories		
		Location: 5205 Shalima female apparel and foot		ma City OK 73135		\$300.00
[Jewelry Examples: Everyday ☐ No ☐ Yes. Describe	/ jewelry, costume jewelry, enga	gement rings,	wedding rings, heirloom je	welry, watches, gems, g	old, silver
		Location: 5205 Shalima costume jewelry	r Dr, Oklahoı	ma City OK 73135		\$25.00
 4.	Non-farm animals Examples: Dogs, ca No Yes. Describe Any other personal No Yes. Give specific	and household items you did	not already l	ist, including any health a	ids you did not list	
15.		ue of all of your entries from F at number here			ou have attached	\$2,075.00
Par	t 4: Describe Your Fi	nancial Assets				
Do	you own or have ar	y legal or equitable interest in	n any of the fo	ollowing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	No	ou have in your wallet, in your h			vhen you file your petitic	on
_	institutio	յ, savings, or other financial acc ոs. If you have multiple account			edit unions, brokerage h	ouses, and other similar
_	■ No □ Yes		Institut	tion name:		
	Examples: Bond fur	ls, or publicly traded stocks ds, investment accounts with br	okerage firms,	, money market accounts		
	■ No □ Yes	Institution or issuer	name:			

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Case number (if known) Camille Jo Johnson 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Fidelty 401k retirement from employment at Child Development Schools Inc \$603.99 Vested balance disclosed 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

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Official Form 106A/B Schedule A/B: Property page 4

				Ca	ıse: 1	9-11	.360	Doc:	1	Filed:	04/08	3/19	Page:	14 of 5	9	
De	ebtor 1	Can	nille Jo	Johnso	n							C	Case numbe	r (if known)		
	Exam ■ No	•	ast due	or lump nformati		mony, s	spousal s	support, c	child sup	pport, ma	iintenanc	e, divor	ce settlemer	nt, property	y settlement	
	Exam ■ No	nples: U b	npaid wa enefits;		sability i oans yo	insuran		ents, disa eone else		penefits, s	iick pay, v	vacatior	n pay, worke	ers' compe	ensation, Social Secu	rity
	Exam			ce polic sability,		nsuranc	ce; health	n savings	accoun	nt (HSA);	credit, ho	omeown	ner's, or rent	er's insura	nce	
	■ No □ Yes	. Name	the insu		ompany Compa			and list its	s value.).	Вє	eneficiar	ry:		Surrender or value:	refund
	If you some	are the one has	benefic died.		ı living t			neone wh ceeds fro			ce policy,	or are o	currently ent	itled to red	ceive property becaus	se
	Exam ■ No	nples: A	ccidents		ment d					suit or m ghts to sue		emand f	for paymen	t		
	■ No			d unliq ı n claim		claims	s of ever	y nature,	, includ	ding cour	nterclain	ns of th	e debtor an	id rights t	o set off claims	
	■ No			you die		ready l	list									
36					-			Part 4, inc	_		ries for p	oages y	ou have att	ached	\$6	03.99
Pa	rt 5: D	escribe .	Any Bus	iness-Re	lated Pr	operty \	You Own	or Have a	n Intere	est In. List	any real	estate in	Part 1.			
ı	No. G	own or so to Part Go to lin	t 6.	y legal o	equitat	ole inter	rest in any	y business	s-related	d property	1?					
Pa							ing-Relate t it in Part		ty You C	Own or Ha	ive an Inte	erest In.				
46.	■ No	o. Go to F	Part 7.	any leg	al or ed	quitabl	e interes	st in any t	farm- c	or comme	ercial fis	hing-re	elated prope	erty?		
Pa	rt 7:	Desc	ribe All	Property	You Ow	n or Ha	ive an Inte	erest in Th	nat You	Did Not Li	ist Above					
	Exam ■ No	nples: S	eason ti		ountry c	lub me	ou did n mbership	ot alread	ly list?							

Official Form 106A/B Schedule A/B: Property page 5 Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 15 of 59

Deb	tor 1 Camille Jo Johnson		Case number (if known)	
54.	Add the dollar value of all of your entries from Part 7. Write that	nt number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$70,000.00
56.	Part 2: Total vehicles, line 5	\$15,294.00		
57.	Part 3: Total personal and household items, line 15	\$2,075.00		
58.	Part 4: Total financial assets, line 36	\$603.99		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$17,972.99	Copy personal property total	\$17,972.99
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$87,972.99

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Fill in this inform					
Debtor 1	Camille Jo Johnso	n Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA					
Case number					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
5205 Shalimar Dr Oklahoma City, OK 73135 Oklahoma County	\$70,000.00		\$75,000.00	Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla. Stat. tit. 31, § 2	
Legal Description OAKCLIFF SEC 13 Block: 028 Lot 002 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	O. M. C. C. M. C. F. G. Z.	
2013 Cheverolet Suburban LT 116000	\$15,294.00		\$1,414.00	Okla. Stat. tit. 31, § 1(A)(13)	
VIN#1GNSKKE74DR126150 Location: 5205 Shalimar Dr, Oklahoma City OK 73135 KBB Good value used Line from <i>Schedule A/B</i> : 3.1	ā		100% of fair market value, up to any applicable statutory limit		
Location: 5205 Shalimar Dr, Oklahoma City OK 73135	\$1,200.00		\$1,200.00	Okla. Stat. tit. 31, § 1(A)(3)	
used furniture Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Location: 5205 Shalimar Dr, Oklahoma City OK 73135	\$500.00		\$500.00	Okla. Stat. tit. 31, § 1(A)(3)	
Electronics, phone, tv, used Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit		

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Del	btor 1 Camille Jo Johnson		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Check only one box for each exemption. Schedule A/B		
	Location: 5205 Shalimar Dr, Oklahoma City OK 73135 female apparel and footwear Line from <i>Schedule A/B</i> : 11.1	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31, § 1(A)(7)
	Fidelty 401k retirement from employment at Child Development Schools Inc Vested balance disclosed Line from <i>Schedule A/B</i> : 21.1	\$603.99	\$603.99 100% of fair market value, up to any applicable statutory limit	Okla. Stat. tit. 31, § 1(A)(20)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covers □ No □ Yes	3 years after that for ca		

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Fill	in this information	n to identify yo	ur case:				
Deb	tor 1 Ca	amille Jo John	son				
		st Name	Middle Name	Last Name			
	tor 2 use if, filing) First	st Name	Middle Name	Last Name			
Unit	ed States Bankrup	tcy Court for the	: WESTERN DISTRICT OF OKL	AHOMA			
		,					
Cas (if kno	e number own)					☐ Check	cif this is an
							ded filing
∩ff	icial Form 10	16D					
		-	s Who Have Claims S	Sacurad	hy Propert	V	12/15
						-	
s ne	eded, copy the Addit		If two married people are filing togethe out, number the entries, and attach it t				
	per (if known).	. 1. 1					
	any creditors have		y your property? this form to the court with your other	echadulae Vo	u have nothing else t	a report on this form	
	■ Yes. Fill in all of		•	scriedules. 10	d flave flottling else t	o report on this form.	
	List All Sec		below.				
			mare then are accurred aloing list the area	ditor concretch.	Column A	Column B	Column C
for e	ach claim. If more the	an one creditor ha	more than one secured claim, list the creations a particular claim, list the other creditors ical order according to the creditor's name	in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1	OneMain Finan	cial	Describe the property that secures t	he claim:	\$13,880.00	\$15,294.00	\$0.00
	Creditor's Name		2013 Cheverolet Suburban LT	116000			
			miles VIN#1GNSKKE74DR126150				
			Location: 5205 Shalimar Dr, O	klahoma			
			City OK 73135				
	Attn: Bankrupto	sy .	KBB Good value used				
	601 Nw 2nd Str		As of the date you file, the claim is: apply.	Check all that			
	Evansville, IN 4	7708	☐ Contingent				
	Number, Street, City, S	state & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes the debt? C	heck one.	Nature of lien. Check all that apply.				
_	Debtor 1 only Debtor 2 only		An agreement you made (such as r car loan)	mortgage or secu	ured		
	Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
	at least one of the deb		☐ Judgment lien from a lawsuit	,			
_	Check if this claim re		Other (including a right to offset)				
	community debt						
		Opened					
		11/18 Last					
Date	debt was incurred	Active 3/15/19	Last 4 digits of account numb	ner 6786			
-410	acot nao mouneu	3/10/13					
		=	Column A on this page. Write that number	ber here:	\$13,88	30.00	
	his is the last page of the control		the dollar value totals from all pages.		\$13,88	30.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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FilLin	n this information to identify your ca	ase:					
Debto	or 1 Camille Jo Johnson First Name	Middle Name	Last Name	•			
Debto							
(Spous	e if, filing) First Name	Middle Name	Last Name	9			
Unite	d States Bankruptcy Court for the:	WESTERN DISTRICT OF	OKLAHOMA				
Case	number						
(if know	vn)						if this is an
						amend	ed filing
Offic	cial Form 106E/F						
Sch	edule E/F: Creditors Wi	no Have Unsecu	red Claim	S			12/15
any exe Schedi Schedi Ieft. Att name a	complete and accurate as possible. Use ecutory contracts or unexpired leases to use of Executory Contracts and Unexpirule D: Creditors Who Have Claims Secutach the Continuation Page to this page and case number (if known). List All of Your PRIORITY Uns	nat could result in a claim. ed Leases (Official Form 10 red by Property. If more spa . If you have no information	Also list executo 6G). Do not inclu ce is needed, co	ry contracts ide any crec py the Part	s on Schedule A/B: F ditors with partially s you need, fill it out, I	Property (Official For secured claims that a number the entries in	m 106A/B) and on re listed in the boxes on the
1. D	o any creditors have priority unsecured	claims against you?					
	No. Go to Part 2.						
	Yes.						
id po	st all of your priority unsecured claims. entify what type of claim it is. If a claim has ossible, list the claims in alphabetical order art 1. If more than one creditor holds a part	both priority and nonpriority a according to the creditor's na	mounts, list that o me. If you have m	laim here ar	nd show both priority a	nd nonpriority amount	s. As much as
(F	For an explanation of each type of claim, se	e the instructions for this form	in the instruction	booklet.)	Total alaim	Priority	Nonnriority
					Total claim	Priority amount	Nonpriority amount
2.1	IRS (Central Insolvency Opera	tion) Last 4 digits of a	ccount number		\$3,820.00	\$3,820.00	\$0.00
	Priority Creditor's Name PO Box 21126	When was the d	ebt incurred?	2018			
	Philadelphia, PA 19114					-	
,	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you	ou file, the claim	is: Check al	I that apply		
	■ Debtor 1 only	_					
	_	☐ Unliquidated					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of PRIORIT	Y unsecured cla	im·			
	,	☐ Domestic sup					
	At least one of the debtors and another	_		41			
	☐ Check if this claim is for a communi Is the claim subject to offset?	_	-		government u were intoxicated		
	No		-	-	- Word Intoxidated		
	☐ Yes	— Guion Opean)					
2.2	IRS (Central Insolvency Opera	tion) Last 4 digits of a	ccount number		\$846.30	\$846.30	\$0.00
	Priority Creditor's Name				φο το.σσ	φο το.σο	Ψ0.00
	PO Box 21126 Philadelphia, PA 19114	When was the d	ebt incurred?	2014		-	
	Number Street City State Zip Code	As of the date yo	ou file, the claim	is: Check al	I that apply		
1	Who incurred the debt? Check one.	☐ Contingent					
- 1	Debtor 1 only	☐ Unliquidated					
ı	Debtor 2 only	☐ Disputed					
ı	Debtor 1 and Debtor 2 only	Type of PRIORIT	Y unsecured cla	im:			
ı	At least one of the debtors and another	☐ Domestic sup	port obligations				
ı	☐ Check if this claim is for a communi	ty debt Taxes and ce	rtain other debts y	ou owe the	government		
	s the claim subject to offset?	_	-		u were intoxicated		
	No	☐ Other. Specify					
	☐ Yes						

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De	ebtor 1 Camille Jo Johnson	Case number (if known)		
2.3	Priority Creditor's Name PO Box 21126 Philadelphia, PA 19114 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	own Unknown	Unknown
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	\square At least one of the debtors and another	☐ Domestic support obligations		
	\square Check if this claim is for a community debt	■ Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicate	d	
	■ No □ Yes	Other. Specify		
2.4	4 OTC Priority Creditor's Name	Last 4 digits of account number \$2,054	1.00 \$2,054.00	\$0.00
	100 N Broadway Ave., Suite 1500 Oklahoma City, OK 73102	When was the debt incurred? 2018		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	Contingent		
	■ Debtor 1 only	Unliquidated		
	☐ Debtor 2 only	Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim: ☐ Domestic support obligations		
	☐ At least one of the debtors and another	_		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	 ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicate 	d	
	No	☐ Other. Specify		
	Yes			
2.5	OTC Priority Creditor's Name	Last 4 digits of account number Unknown	own Unknown	Unknown
	100 N Broadway Ave., Suite 1500 Oklahoma City, OK 73102	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	\square At least one of the debtors and another	☐ Domestic support obligations		
	\square Check if this claim is for a community debt	Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you were intoxicate	d	
	■ No □ Yes	Other. Specify		
		and Claims		
3.	art 2: List All of Your NONPRIORITY Unsecution Do any creditors have nonpriority unsecured claim			
э.	□ No. You have nothing to report in this part. Submit			
	Yes.			
4.	unsecured claim, list the creditor separately for each of	e alphabetical order of the creditor who holds each claim. If a claim. For each claim listed, identify what type of claim it is. Do not r creditors in Part 3.If you have more than three nonpriority unsecu	ist claims already included in I	Part 1. If more

Total claim

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Debtor	1 Camille Jo Johnson		Case number (if known)	
4.1	Account Resolution Services Nonpriority Creditor's Name	Last 4 digits of account number	1243	\$154.00
	Attn: Bankruptcy Po Box 459079	When was the debt incurred?	Opened 10/17	
	Sunrise, FL 33345 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Collection A	attorney Emer Svc Of Oklahoma	
4.2	Adam N Bush (attorney) Nonpriority Creditor's Name	Last 4 digits of account number		\$876.00
	Po Box 60864 Oklahoma City, OK 73146	When was the debt incurred?	-	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.3	AFNI	Last 4 digits of account number	2501	\$71.00
	Nonpriority Creditor's Name 1310 Martin Luther King Drive PO BOx 3571	When was the debt incurred?		
	Bloomington, IL 61702-3517 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure		
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify		

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Debtor 1 Camille Jo Johnson		Case number (if known)				
4.4	American Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	5183	\$1,203.00		
	Attn: Bankruptcy 3100 Sw 59th St. Oklahoma City, OK 73119	When was the debt incurred?	Opened 10/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	g plans, and other similar debts				
	Yes	■ Other. Specify Collection A	ttorney Community Hospital	-		
4.5	Autovest LLC	Last 4 digits of account number		\$0.00		
	Nonpriority Creditor's Name 26261 Evergreen Rd Suite 390 Southfield, MI 48076	When was the debt incurred?	-			
	Number Street City State Zip Code					
	Who incurred the debt? Check one.	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	·				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify		-		
4.6	Cac financial Nonpriority Creditor's Name	Last 4 digits of account number		\$115.77		
	2601 Nw Expressway Suite 1000 Oklahoma City, OK 73112	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify		-		

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Debtor	Camille Jo Johnson		Case number (if kno	own)	
4.7	Capital One	Last 4 digits of account number	8031	_	\$856.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 03/16 1/18/19	Last Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that app	ly	
	<u> </u>				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or o	divorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharir		milar debts	
	Yes	Other. Specify Credit Card			
4.8	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0789	_	\$680.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 07/15 1/18/19	Last Active	
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim	ie: Chack all that ann	hv	
	Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that app	ıy	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or o	divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other sir	milar debts	
	Yes	■ Other. Specify Credit Card			
4.9	City National Bank	Last 4 digits of account number	1335		\$193.00
	Nonpriority Creditor's Name	_		_	·
	Attn: Bankruptcy Po Box 2009	When was the debt incurred?	Opened 12/14		
	Lawton, OK 73502 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that ann	lv	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	or or our air and app	•,	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or o	divorce that you did not	
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing	ng plans, and other sir	milar debts	
	☐ Yes	Other. Specify Deposit Rel	ated		

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Debt	or 1 Camille Jo Johnson	Case number (if known)		
4.1 0	City National Bank	Last 4 digits of account number	\$193.00	
Ü	Nonpriority Creditor's Name 500 SW D Ave	When was the debt incurred?		
	Lawton, OK 73501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify		
4.1 1	Convergent Outsourcing, Inc.	Last 4 digits of account number 4876	\$731.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9004	When was the debt incurred? Opened 08/17		
	Renton, WA 98057	As at the data way file the alaim is Obsalvall that such		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	□ Continued		
	<u> </u>	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	☐ At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Collection Attorney Cox Communications		
4.1 2	Credit Collection Services Nonpriority Creditor's Name	Last 4 digits of account number	\$683.51	
	725 Canton St Norwood, MA 02062	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	unity		
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	■ Other. Specify collection for liberty mutual		
		The same of the sa		

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Debt	or 1 Camille Jo Johnson	Case number (if known)				
4.1	0 10 0 0 1					
3	Credit One Bank	Last 4 digits of account number	Unknown			
	Nonpriority Creditor's Name ATTN: Bankruptcy PO Box 98873	When was the debt incurred?				
	Las Vegas, NV 89193 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The state of the s				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
		☐ Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify				
		— Other. Specify				
4.1 4	Credit Service, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 7118	\$876.00			
	Attn: Bankruptcy 2519 N. W 23rd St. Ste 204	When was the debt incurred? Opened 10/14/16				
	Oklahoma City, OK 73107 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify 01 Okla Federal Credit Union Nsf				
4.1 5	Credit World Services Inc	Last 4 digits of account number	\$100.00			
<u> </u>	Nonpriority Creditor's Name 6000 Martway St	When was the debt incurred?	<u> </u>			
	Mission, KS 66202-3339 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	Пол				
	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	′	·				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another ☐ Type of NONPRIORITY unsecured claim:				
		Student loans				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No □ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify				
		-1 v				

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Debte	or 1 Camille Jo Johnson		Case number (if known)			
4.1 6	CSI Group	Last 4 digits of account number	6695	\$876.10		
	Nonpriority Creditor's Name 2519 NW 23rd Suite 204 Oklahoma City, OK 73107	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community debt	☐ Student loans				
	Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.1	Department of Education/Nelnet	Last 4 digits of account number	7605	\$25,777.00		
	Nonpriority Creditor's Name			. ,		
	Attn: Claims	When we sho debt in some 12	Opened 09/14 Last Active			
	Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	9/05/17			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.1						
8	Department of Education/Nelnet	Last 4 digits of account number	7505	\$24,013.00		
	Nonpriority Creditor's Name Attn: Claims		Opened 09/14 Last Active			
	Po Box 82505	When was the debt incurred?	9/05/17			
	Lincoln, NE 68501					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	_					
	☐ Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	d claim:				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing				
		_	y pians, and other similal debts			
	☐ Yes	Other. Specify				
		Educational				

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Debtor 1 Camille Jo Johnson		Case number (if known)			
4.1 9	Eldorado Mtr	Last 4 digits of account number	3622	\$11,003.00	
	Nonpriority Creditor's Name 707 Nw 5th St	When was the debt incurred?	Opened 5/06/13 Last Active 5/19/16		
	Oklahoma City, OK 73102 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Automobile			
4.2	Genesis Bc/celtic Bank	Last 4 digits of account number	1332	\$399.00	
	Nonpriority Creditor's Name Attn: Bankruptcy 268 South State Street Ste 300 Salt Lake City, UT 84111	When was the debt incurred?	Opened 07/18 Last Active 1/18/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit Card			
4.2	H&R Accounts Inc Nonpriority Creditor's Name	Last 4 digits of account number	4211	\$2,639.00	
	5320 22nd Ave Moline, IL 61266-0672	When was the debt incurred?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	a plane, and other similar date.		
	■ No	Debts to pension or profit-sharin	g pians, and other similar debts		
	☐ Yes	Other. Specify			

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Debtor	1 Camille Jo Johnson	Case number (if known)	
4.2			
2	HRRG	Last 4 digits of account number 4570	\$154.49
	Nonpriority Creditor's Name PO box 8486	When was the debt incurred?	
	Pompano Beach, FL 33075	Then was the dest incurred.	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
1			
4.2	Indigo Credit Cards	Last 4 digits of account number	\$316.23
	Nonpriority Creditor's Name		
	PO Box 4499 Beaverton, OR 97076	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Integris	Last 4 digits of account number 0855	\$85.00
4	Nonpriority Creditor's Name	Last 4 digits of account number U855	Ψ05.00
	PO Box 108801	When was the debt incurred?	
	Oklahoma City, OK 73101		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		· · ·	

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Debto	or 1 Camille Jo Johnson	Case number (if known)		
4.2	Integris Southwest Medical Center Nonpriority Creditor's Name PO Box 268908 Oklahoma City, OK 73126-8908	Last 4 digits of account number 5527 When was the debt incurred?	\$4,507.00	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.2 6	iQuantified Mgmt Services LLC	Last 4 digits of account number	\$54.35	
	Nonpriority Creditor's Name 2821 S Parker Rd Ste 305 Aurora, CO 80014	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.2 7	LVNV Funding/Resurgent Capital	Last 4 digits of account number 3961	\$661.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred? Opened 12/17		
	Greenville, SC 29603 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims		
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts		
	_	Factoring Company Account Credit One Bank		
	Yes	Other. Specify N.A.		

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Debto	or 1 Camille Jo Johnson		Case number (if known)				
4.2	Millennium Financial G	Last 4 digits of account number	2166	\$470.00			
	Nonpriority Creditor's Name Attn: Bankruptcy 3000 United Founders Blvd. Ste 219	When was the debt incurred?	Opened 11/15/16				
	Oklahoma City, OK 73112 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify 01 10 Gym					
4.2 9	Modern Loans	Last 4 digits of account number		Unknown			
	Nonpriority Creditor's Name 309 SW 59th St Suite 106 Oklahoma City, OK 73109						
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	g plans, and other similar debts					
	☐ Yes	Other. Specify					
4.3	N.I. d		4704				
0	Nelnet Nonpriority Creditor's Name	Last 4 digits of account number	1724	Unknown			
	Attn: Claims		Opened 09/07 Last Active				
	Po Box 82505	When was the debt incurred?	9/19/14				
	Lincoln, NE 68501 Number Street City State Zip Code	As of the date you file, the claim i	s. Check all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim i	S. Officer all that apply				
	■ Debtor 1 only						
	Debtor 2 only	□ Debtor 2 only □ Unliquidated					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
		Educational					

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Debto	Camille Jo Johnson	Case number (if known)					
4.3	Nelnet	Lord A. Politica de la constanta de la constan	3824	Unknown			
1	Nonpriority Creditor's Name	Last 4 digits of account number		Unknown			
	Attn: Claims		Opened 01/07 Last Active				
	Po Box 82505	When was the debt incurred?	9/19/14				
	Lincoln, NE 68501 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•	,				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	Other. Specify					
	— 133	Educational					
42							
4.3 2	Nelnet	Last 4 digits of account number	1624	Unknown			
	Nonpriority Creditor's Name Attn: Claims		Opened 09/07 Last Active				
	Po Box 82505	When was the debt incurred?	9/19/14				
	Lincoln, NE 68501						
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	Student loans					
	debt	Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	☐ Yes	☐ Other. Specify Educational					
		Educational					
4.3 3	Nelnet	Last 4 digits of account number	3924	Unknown			
	Nonpriority Creditor's Name	_	On an ad 04/07. Look Active				
	Attn: Claims Po Box 82505	When was the debt incurred?	Opened 01/07 Last Active 9/19/14				
	Lincoln, NE 68501	_					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	☐ Contingent					
	Debtor 1 only	——————————————————————————————————————					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:				
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
		Educational					

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Debtor	1 Camille Jo Johnson	Case number (if known)					
4.3	Oklahoma Center for Orthopedic Surg	Last 4 digits of account number	8078	\$4,981.49			
	Nonpriority Creditor's Name PO Box 890609	When was the debt incurred?					
	Oklahoma City, OK 73189 Number Street City State Zip Code	As of the date you file, the claim i	s. Chack all that apply				
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Officer all trial apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify					
4.3	SW Orthopaedic	Last 4 digits of account number	4766	\$695.94			
	Nonpriority Creditor's Name PO Box 269049 Oklahoma City, OK 73126	When was the debt incurred?					
	Number Street City State Zip Code						
	Who incurred the debt? Check one.						
	■ Debtor 1 only						
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans					
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharin					
	Yes	Other. Specify					
4.3	Tide Circus		4500	Ф00 7 00			
6	Tide Finance Nonpriority Creditor's Name	Last 4 digits of account number	<u>4582</u>	\$627.00			
	425 Sw 44th Oklahoma City, OK 73109	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
	Who incurred the debt? Check one.	•	,				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	□Yes	■ Other. Specify Note Loan					

Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 33 of 59 Debtor 1 Camille Jo Johnson Case number (if known) 4.3 Wakefield & Associates 2504 \$510.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: bankruptcy When was the debt incurred? **Opened 02/16** 7005 Middlebrook Pike Knoxville, TN 37909 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Emergency Services Of ☐ Yes Other. Specify Oklahoma 4.3 \$686.00 Works and Lentz, INC Last 4 digits of account number Nonpriority Creditor's Name 3030 NW Expressway Street Suite When was the debt incurred? 1300 Oklahoma City, OK 73112 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt oxed Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Autovest LLC c/o Letham Steele et al Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PC ■ Part 2: Creditors with Nonpriority Unsecured Claims 1515 E 71st st suite 200

Tulsa, OK 74136

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 6,720.30
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

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Debtor 1 Camille Jo Johnson

Debtor 1 Camille Jo Johnson			Case number (if known)		
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	6,720.30
Total	6f.	Student loans	6f.	Total	Claim 49,790.00
claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	35,397.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	85,187.88

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Fill in this infor	ill in this information to identify your case:				
Debtor 1 Camille Jo Johnson					
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT O	OF OKLAHOMA		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
	•				

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Fill in thi	s information to identify	your case:			
Debtor 1	Camille Jo Jol	hnson			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for t	the: WESTERN DISTRICT	OF OKLAHOMA		
Case nun	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	al Form 106H				
	dule H: Your C	odehtors			12/15
Scrie	dule II. Toul C	ouebiois			12/15
your nam	e and case number (if kn	n the boxes on the left. Attac own). Answer every question ? (If you are filing a joint case,	1.		p of any Additional Pages, write
20	you have any couculors	(ii you are iiiiig a jeiiit ease,	do not not olaror opodoo	ac a codestor.	
■ No					
☐ Ye	98				
		e you lived in a community p siana, Nevada, New Mexico, P			
■ No	o. Go to line 3.				
☐ Ye	es. Did your spouse, former	r spouse, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again as a codebtor o	only if that person is a guara	ntor or cosigner. Make	sure you have listed tl	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebto	r		Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State			Check all schedule	
3.1				☐ Schedule D, lin	Δ
0.1	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	
	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, lin	•
J.Z	Name			Schedule E/F, I	
				☐ Schedule G, lin	
	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2019 Best Case, LLC - www.bestcase.com Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 37 of 59

Fill	in this information to identify	your case:							
Del	otor 1 Camille	e Jo Johnson			_				
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court	for the: WESTERN DISTRIC	T OF OKLAHOMA		_				
	se number		_			Check if this is	:		
(If kr	nown)					An amende	-		
_	··					☐ A supplem 13 income	ent showing as of the foll		
	fficial Form 106l					MM / DD/ Y	/YYY		
S	chedule I: Your	Income							12/15
spo atta	use. If you are separated a ch a separate sheet to this t1: Describe Employ Fill in your employment	If you are married and not fil nd your spouse is not filing v form. On the top of any addit ment	vith you, do not inc	clude inforn	natio	n about your sp case number (if	ouse. If mor	e space is i swer every	needed,
	information.					☐ Empl		ig spouse	
	If you have more than one attach a separate page wit information about additional	h Employment status	■ Employed□ Not employe	ed			mployed		
	employers.	Occupation	Region Food I	Monitor					
	Include part-time, seasona self-employed work.	l, or Employer's name	Childcare Net	work					
	Occupation may include st or homemaker, if it applies		6053 Veterans Columbus, GA		Bld (300			
		How long employed	there? <u>10.5</u>	years					
Par	Give Details Abo	ut Monthly Income							
	mate monthly income as our use unless you are separated	f the date you file this form. It d.	f you have nothing t	to report for a	any li	ne, write \$0 in the	space. Inclu	ıde your nor	n-filing
	u or your non-filing spouse he space, attach a separate sl	ave more than one employer, oneet to this form.	combine the informa	ation for all e	mplo	yers for that perso	on on the line	es below. If y	you need
						For Debtor 1	For Debt non-filing	or 2 or g spouse	
2.		s, salary, and commissions (lonthly, calculate what the month		2.	\$	4,333.33	\$	N/A	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income.	Add line 2 + line 3.		4.	\$	4,333.33	\$	N/A	

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Deb	otor 1	Camille Jo Johnson	_	Cas	e number (if known)			
				Fo	or Debtor 1	1	For Debtor		
	Cop	by line 4 here	4.	\$_	4,333.33	3 5	\$	N/A	
5.	List	all payroll deductions:							
	5a. 5b. 5c. 5d. 5e.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5a. 5b. 5c. 5d. 5e.	\$ \$ \$ \$	814.67 0.00 0.00 0.00 264.33	<u>)</u>	\$ \$ \$ \$ \$	N/A N/A N/A N/A	
	5f. 5g. 5h.	Domestic support obligations Union dues Other deductions. Specify:	5f. 5g. 5h	\$ \$ + \$	0.00 0.00 0.00)))) + 9	\$ \$ \$	N/A N/A N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,079.00	_	\$	N/A	
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	7. 8a. 8b.	\$ ₋	3,254.33 0.00 0.00	<u> </u>	\$ \$	N/A N/A N/A	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive	8c. 8d. 8e.	\$ _ \$ _ \$ _	0.00 0.00 0.00	<u>) </u>	\$ \$ \$ \$	N/A N/A N/A	
	8g. 8h.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: adult age daughter disability	8f. 8g. 8h	\$ \$ + \$	0.00 0.00 875.00) :	\$ \$ \$	N/A N/A N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	875.00		\$	N/A	<u> </u>
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	·	4,129.33 +	\$	N/A	= \$	4,129.33
11.	I1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						\$Combin	4,129.33
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?					monthly	y income

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Fill	in this information to identify your case:						
			Ch	eck if this is:			
Den	Camille Jo Johnson		An amended filing				
	btor 2				wing postpetition chapter		
(Spo	ouse, if filing)			13 expenses as of	the following date:		
Unit	ted States Bankruptcy Court for the: WESTERN DISTRICT OF OR	KLAHOMA		MM / DD / YYYY			
Cas	se number						
(If k	known)						
_							
	fficial Form 106J						
	chedule J: Your Expenses				12/1		
info	as complete and accurate as possible. If two married peop ormation. If more space is needed, attach another sheet to mber (if known). Answer every question.						
Par							
1.	Is this a joint case?						
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household?						
	□ No						
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expe	nses for Separate House	hold of De	btor 2.			
2.	Do you have dependents? ☐ No						
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?		
	Do not state the				□ No		
	dependents names.	Granddaughter		14	Yes		
		Daughter		34	□ No		
		Dauginei			■ Yes □ No		
					☐ Yes		
					□ No		
3.	Do your expenses include ■ No				☐ Yes		
	expenses of people other than yourself and your dependents?						
	yoursell and your dependents:						
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unlepenses as of a date after the bankruptcy is filed. If this is a splicable date.						
•							
	clude expenses paid for with non-cash government assistar e value of such assistance and have included it on Schedule						
(Of	fficial Form 106l.)			Your exp	enses		
4.	The rental or home ownership expenses for your resident payments and any rent for the ground or lot.	ce. Include first mortgage	4.	\$	0.00		
	If not included in line 4:						
	4a. Real estate taxes		4a.	\$	75.00		
	4b. Property, homeowner's, or renter's insurance		4b.	·	95.00		
	4c. Home maintenance, repair, and upkeep expenses		4c.	·	300.00		
5.	4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such a	is home equity loans	4d. 5.	·	0.00		

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Debtor	r 1	Camille J	o Johnson	Case num	ber (if known)	
6. U	Itiliti	ies:				
-	a.		heat, natural gas	6a.	\$	250.00
	b.	-	ver, garbage collection	6b.		65.00
	C.		e, cell phone, Internet, satellite, and cable services	6c.	·	230.00
	d.	Other. Spe	· · · · · · · · · · · · · · · · · · ·	6d.		0.00
			ekeeping supplies	ou. 7.	·	700.00
			children's education costs	7. 8.	*	
						50.00
		•	ry, and dry cleaning	9.		200.00
		•	roducts and services	10.	·	200.00
			ntal expenses	11.	\$	150.00
			Include gas, maintenance, bus or train fare.	12.	\$	400.00
			ar payments. clubs, recreation, newspapers, magazines, and books	13.	·	
					·	150.00
			ributions and religious donations	14.	>	100.00
15. I r						
			surance deducted from your pay or included in lines 4 or 20.	150	c	0.00
		Life insura		15a.	·	0.00
		Health ins		15b.	· —	0.00
		Vehicle ins		15c.	·	163.00
			rance. Specify:	15d.	\$	0.00
			clude taxes deducted from your pay or included in lines 4 or 20.			
	peci			16.	\$	0.00
			ease payments:			
			ents for Vehicle 1	17a.	· ———	434.95
			ents for Vehicle 2	17b.	\$	0.00
1	7c.	Other. Spe	ecify:	17c.	\$	0.00
1	7d.	Other. Spe	ecify:	17d.	\$	0.00
18. Y	our	payments	of alimony, maintenance, and support that you did not report as			
d	edu	cted from	your pay on line 5, S <i>chedule I, Your Income</i> (Official Form 106I).	18.		0.00
19. O	othe	r payments	s you make to support others who do not live with you.		\$	0.00
	peci	·		19.		
			erty expenses not included in lines 4 or 5 of this form or on Sch			
			s on other property	20a.		0.00
2	0b.	Real estat	e taxes	20b.	\$	0.00
2	0c.	Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
2	0d.	Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
2	0e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21. O	the	r: Specify:	adult age daughter separate debt (including student loans)	21.	+\$	300.00
		-1 7		<u>' </u>		
			monthly expenses			
			through 21.		\$	3,862.95
2	2b. (Copy line 22	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
			a and 22b. The result is your monthly expenses.		\$	3,862.95
			, , , ,		· —	0,002.00
		-	monthly net income.			
			12 (your combined monthly income) from Schedule I.	23a.		4,129.33
2	3b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	3,862.95
2	3c.		our monthly expenses from your monthly income.			000.00
		The result	is your monthly net income.	23c.	\$	266.38
Fo m	or ex nodifi	cample, do yo	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect you terms of your mortgage?			or decrease because of a
	No	٥.				
Г	ΙYe	es.	Explain here: Adult age daughter does not work and draws so	ocial secu	rity as disclosed	d in schedule I.

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Fill in this infor	rmation to identify your	case:			
Debtor 1	Camille Jo Johnso		Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT	OF OKLAHOMA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Dec				
		ın Individual	Dobtor's S	Schodulos	
Declara	HOH ADOUL &	iii iiiuiviuuai	Deniol 2 3	ocitedules	12/15
	18 U.S.C. §§ 152, 1341, 1 gn Below	519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an atto	ney to help you fill ou	ut bankruptcy forms?	
■ No					
□ Yes.	Name of person			Attach Bankrupt	cy Petition Preparer's Notice,
					Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules	filed with this declaration an	nd
X /s/ Car	mille Jo Johnson		X		
	le Jo Johnson			e of Debtor 2	
Signatu	ure of Debtor 1				
Date	April 8, 2019		Date		

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Debtor 1 Camille Jo Johnson First Name Debtor 2 First Name Middle Name Last Name Debtor 2 First Name Middle Name United States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA Case number if known) Case number If known) Case number If known Case number Case number Case number If known Case number Case num								
Debtor 2 [Secouse It, Blings] First Name Moddle Name Last Name	Fil	in this ii	nformation to identify you	r case:				
Debtor 2 Sources to fing Frail Name Mode Name Last Name Last Name	De	btor 1				ant Name		
United States Bankruptcy Court for the: WESTERN DISTRICT OF OKLAHOMA Case number WESTERN DISTRICT OF OKLAHOMA	De	htor 2	riist Name	Middle Name		ast name		
Case number Check if this is an amended filing Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/19 Be as complete and accurate as possible. If we married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there			First Name	Middle Name	L	ast Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not marrie	Un	ited State	s Bankruptcy Court for the:	WESTERN DISTRICT O	OF OKLAH	HOMA		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not marrie	Ca	se numbe	er					
Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married								
Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/19 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not married								
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married Not marri	Of	ficial	Form 107					
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before	St	ateme	ent of Financial	Affairs for Indivi	duals	Filing for B	ankruptcy	4/19
What is your current marital status? Married Not married	info	rmation.	If more space is needed,	attach a separate sheet to				
Married Not married	Pa	rt 1: G	ive Details About Your Ma	rital Status and Where Yo	u Lived E	Before		
During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips	1.	What is	your current marital statu	s?				
During the last 3 years, have you lived anywhere other than where you live now? No		□ Ма	rried					
No		■ No	t married					
Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there	2.	During	the last 3 years, have you	lived anywhere other thar	n where y	ou live now?		
Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there		■ No						
lived there		_		ived in the last 3 years. Do	not include	e where you live now	<i>I</i> .	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Sources of Income grow employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips		Debtor	1 Prior Address:		1	Debtor 2 Prior Ad	ldress:	
No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips	3.	Within t	he last 8 years, did you ev	ver live with a spouse or le	egal equiv	alent in a commun	ity property state or territor	y? (Community property
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips	stat	es and te	rritories include Arizona, Ca	lifornia, Idaho, Louisiana, N	evada, Ne	ew Mexico, Puerto Ri	ico, Texas, Washington and V	Visconsin.)
Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips		■ No						
From January 1 of current year until the date you filed for bankruptcy: Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips To a the date you filed for bankruptcy:		☐ Ye	s. Make sure you fill out Sch	nedule H: Your Codebtors (0	Official Fo	rm 106H).		
From January 1 of current year until the date you filed for bankruptcy: Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips To a the date you filed for bankruptcy:	De	-4 O =	omlain the Carmana of Vari					
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pestor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips	Pa	1122 E	xpiain the Sources of You	r income				
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$15,560.00 Wages, commissions, bonuses, tips \$15,560.00	4.	Fill in the	e total amount of income yo	u received from all jobs and	all busine	esses, including part-	-time activities.	ndar years?
Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$15,560.00 Wages, commissions, bonuses, tips \$15,560.00		П №						
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$15,560.00 Wages, commissions, bonuses, tips								
Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$15,560.00 Wages, commissions, bonuses, tips				Debtor 1			Debtor 2	
Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy: Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy: Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy:					Gros	s income		Gross income
the date you filed for bankruptcy: wages, commissions, bonuses, tips bonuses, tips					(before	re deductions and		(before deductions
☐ Operating a business ☐ Operating a business						\$15,560.00	_	
				☐ Operating a business			☐ Operating a business	

Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 43 of 59 Debtor 1 Camille Jo Johnson Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$52,578.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$57,527.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
OneMain Financial Attn: Bankruptcy 601 Nw 2nd Street Evansville, IN 47708	monthly payments of \$434.95	\$1,304.85	\$13,880.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

Debtor 1 Camille Jo Johnson Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and No ☐ Yes. List all payments to an insider. **Insider's Name and Address Dates of payment** Total amount Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Bell Finance vs CAMILLE JOHNSON CLEVELAND DISTRICT □ Pending SC2017675 COURT □ On appeal Concluded Autovest LLC x Camille Johnson **Breach of Contract** Oklahoma County Pending CS 12-8931 □ On appeal Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** Autovest LLC c/o Letham Steele et al paycheck garnishment 1/4/19 through present \$2,100.00 1/4/19 -3/29/19 \$300 per bi-weekly paycheck 1515 E 71st st suite 200 Tulsa, OK 74136 ☐ Property was repossessed. ☐ Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied.

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Case number (if known)

Del	btor 1 Camille Jo Johnson		Case	number (ii	f known)				
11.	Within 90 days before you filed for bank accounts or refuse to make a payment b			ancial inst	itution, set off any a	amounts from your			
	☐ Yes. Fill in the details.								
	Creditor Name and Address	De	scribe the action the creditor took		Date action was taken	Amount			
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o			on of an as	ssignee for the bene	efit of creditors, a			
Par	Yes								
Pal	tt 5: List Certain Gifts and Contribution	15							
13.	Within 2 years before you filed for bankr ■ No □ Yes. Fill in the details for each gift.	ruptcy, (did you give any gifts with a total value o	of more tha	an \$600 per person	?			
	Gifts with a total value of more than \$60 per person	00	Describe the gifts		Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that is more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Dates you contributed	Value					
Par	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did you le	ose anyth	ing because of the	t, fire, other disaster			
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss the amount that insurance has paid. List punce claims on line 33 of Schedule A/B: Prop	urance has paid. List pending loss					
Pai	rt 7: List Certain Payments or Transfer	s							
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition p	prepari				rty to anyone you			
	□ No■ Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment if Not N	⁄ou	Description and value of any property transferred		Date payment or transfer was made	Amount of payment			
	Person Who Made the Payment, if Not Y Stevenson-Kim Alarkon PLLC 1415 NW 43rd St Oklahoma City, OK 73118 info@skafirm.com	rou	Attorney Fees, credit report, case co- filing fees	osts,	4/1/19 and 4/5/19	\$1,250.00			

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Debtor 1 Camille Jo Johnson Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment			
	Debtorcc.org	credit counseling	g certificate		3/4/19	\$14.95			
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No	rs or to make payments			or transfer any prope	rty to anyone who			
	☐ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and values	alue of any prop	erty	Date payment or transfer was made	Amount of payment			
18	Within 2 years before you filed for bankrupto	cv. did vou sell, trade, o	or otherwise trans	sfer any pro	perty to anyone, other	r than property			
10.	transferred in the ordinary course of your but include both outright transfers and transfers mainclude gifts and transfers that you have already	usiness or financial affa ade as security (such as	airs? the granting of a s						
	■ No								
	☐ Yes. Fill in the details.								
	Person Who Received Transfer Address	Description and very property transfer			any property or s received or debts	Date transfer was made			
	Person's relationship to you			p a.a	90				
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		ny property to a s	elf-settled tr	rust or similar device o	of which you are a			
	Yes. Fill in the details.								
	Name of trust Description and value of the property transferred					Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?	-							
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No								
	☐ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	r bankruptcy, any	safe depos	it box or other deposi	tory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?			
		•							

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Debtor 1	Camille Jo Johnson	Case number (if known)

22.	2. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?						
	■ No						
	☐ Yes. Fill in the deta	ils.					
	Name of Storage Facilit Address (Number, Street, C	•	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?		
Par	t 9: Identify Property	ou Hold or Control for	Someone Else				
23.	Do you hold or control a for someone.	any property that someo	one else owns? Include any proper	ty you borrowed from, are storing for	r, or hold in trust		
	_						
	No	_					
	Yes. Fill in the deta	ails.					
	Owner's Name Address (Number, Street, Co	ity, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Par	t 10: Give Details Abou	t Environmental Informa	ation				
For	the purpose of Part 10, th	ne following definitions	apply:				
	toxic substances, waste	es, or material into the a	<u> </u>	ning pollution, contamination, release dwater, or other medium, including st			
	Site means any location	, facility, or property as	defined under any environmental	law, whether you now own, operate,	or utilize it or used		
_	to own, operate, or utilize it, including disposal sites.						
	Hazardous material mea hazardous material, poll			s waste, hazardous substance, toxic s	substance,		
Rep	ort all notices, releases,	and proceedings that yo	ou know about, regardless of wher	n they occurred.			
24.	Has any governmental u	ınit notified vou that vou	u may be liable or potentially liable	under or in violation of an environm	ental law?		
	3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,				
	No						
	☐ Yes. Fill in the deta	ils.					
	Name of site Address (Number, Street, C	ity, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any go	overnmental unit of any	release of hazardous material?				
	■ No						
	Yes. Fill in the deta	ils.					
	Name of site Address (Number, Street, Co	ity, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice		
26.	Have you been a party in	n any judicial or adminis	ZIP Code) Strative proceeding under any envi	ronmental law? Include settlements	and orders.		
	_						
	■ No □ Yes. Fill in the deta	ils.					
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Par	t 11: Give Details Abou	t Your Business or Con	nections to Any Business				
27.	Within 4 years before vo	ou filed for bankruptev. o	did vou own a business or have an	y of the following connections to an	v business?		
		•	rade, profession, or other activity,		,		
	_			•			
		mited liability company	(LLC) or limited liability partnersh	ıp (LLP)			
Offici	al Form 107	Statement of	of Financial Affairs for Individuals Filing	g for Bankruptcy	page 6		

Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 48 of 59 Debtor 1 Camille Jo Johnson Case number (if known) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Camille Jo Johnson Signature of Debtor 2 Camille Jo Johnson Signature of Debtor 1 Date April 8, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	ation to identify your	case:			
Debtor 1	Camille Jo Johnso				
	First Name	Middle Name	Last Nam	ie	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	ie	
United States Ban	kruptcy Court for the:	WESTERN DISTR	RICT OF OKLAHOMA		
	., .,				
Case number					☐ Check if this is an
					amended filing
Official For	m 108				
Statemen	t of Intentio	n for Indiv	iduals Filin	g Under Chapte	er 7
_	idual filing under cha claims secured by yo		out this form if:		
_	d personal property a		ot expired.		
	er is earlier, unless th				et for the meeting of creditors, le creditors and lessors you list
	pple are filing together	in a joint case, bo	th are equally respor	sible for supplying correct in	nformation. Both debtors must
•		le If more snace is	needed attach a se	narate sheet to this form. On	the top of any additional pages,
	ur name and case nur		niceded, attach a se	parate sheet to this form. On	the top of any additional pages,
Part 1: List You	ur Creditors Who Have	e Secured Claims			
1 For any creditor	rs that you listed in Pa	art 1 of Schedule D	Creditors Who Have	e Claims Secured by Property	y (Official Form 106D), fill in the
information bel	ow.				,
identify the cred	ditor and the property t	nat is collateral	secures a debt?	d to do with the property that	t Did you claim the property as exempt on Schedule C?
Creditor's Or name:	neMain Financial		☐ Surrender the pr☐ Retain the prope	' '	□ No
			Retain the prope		Yes
•	2013 Cheverolet Su 116000 miles	iburban LT	Reaffirmation A		
property securing debt:	VIN#1GNSKKE74D		Retain the prope	rty and [explain]:	
Scouring debt.	Location: 5205 Shall Oklahoma City OK				
	KBB Good value us		continue to pay		<u> </u>
Part 2: List You	ur Unexpired Persona	l Property I eases			
For any unexpired	personal property le	ase that you listed			ed Leases (Official Form 106G), fill
				ases that are still in effect; th assume it. 11 U.S.C. § 365(p)(ne lease period has not yet ended. (2).
Describe your un	expired personal prop	perty leases			Will the lease be assumed?
Lessor's name:					□ No
Description of least Property:	sed				□ V
opony.					☐ Yes
Lessor's name:					□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Camille Jo Johnson	Case number (if known)
Description of leased Property:	☐ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
property that is subject to an unexpired lease. X /s/ Camille Jo Johnson	about any property of my estate that secures a debt and any personal
Camille Jo Johnson Signature of Debtor 1 Date April 8, 2019	Signature of Debtor 2 Date

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Fill in this in	formation to identify your case:					irected in this form and	in Form
Debtor 1	Camille Jo Johnson		12	2A-1Sι	ipp:		
Debtor 2 (Spouse, if filing			_	■ 1. T	here is no pres	umption of abuse	
-	es Bankruptcy Court for the: Western District o	f Oklahoma		a	applies will be m	o determine if a presur nade under <i>Chapter</i> 7	
Case number (if known)	er			□ 3. T	he Means Test	cial Form 122A-2). does not apply now be	
						service but it could ap	oply later.
Official	Form 122A 1			⊔ Ch	eck if this is a	n amended filing	
	Form 122A - 1		مدا دا دا د				
Chapte	r 7 Statement of Your Cur	rent Mor	ithly inc	om	<u>e</u>		12/15
attach a separ case number qualifying mil	te and accurate as possible. If two married people a rate sheet to this form. Include the line number to w (if known). If you believe that you are exempted fro itary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	vhich the addition m a presumption	al information a of abuse becau	applies. Ise you	On the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
	,	alv.					
_	s your marital and filing status? Check one or	ııy.					
_	married. Fill out Column A, lines 2-11.	it both Columns	A and D. lines	0.44			
	ried and your spouse is filing with you. Fill ou ried and your spouse is NOT filing with you.			2-11.			
_	iving in the same household and are not lega	•	•	lumne	A and B. lines 3	0 11	
_	iving separately or are legally separated. Fill						u declare under
ŗ	penalty of perjury that you and your spouse are living apart for reasons that do not include evading.	egally separated	l under nonbar	kruptc	/ law that applie	es or that you and you	
101(10A). the 6 mont	average monthly income that you received from all For example, if you are filing on September 15, the 6-m hs, add the income for all 6 months and divide the total wn the same rental property, put the income from that p	nonth period would by 6. Fill in the res	be March 1 thro sult. Do not inclu-	ugh Aug de any ii	ust 31. If the amo	ount of your monthly incompre than once. For examp	ne varied during ble, if both
·				Colun Debto		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	4,622.00	\$	
Columi	ny and maintenance payments. Do not include n B is filled in.		·	\$	0.00	\$	
of you from ar and roo	ounts from any source which are regularly pa or your dependents, including child support a unmarried partner, members of your household ommates. Include regular contributions from a sp	 Include regular your depender 	contributions nts, parents,	Φ.	0.00	0	
	. Do not include payments you listed on line 3.			\$	0.00	\$	
5. Net inc	come from operating a business, profession,		tor 1				
Gross	receipts (before all deductions)	\$ 0.00					
	ry and necessary operating expenses	-\$ 0.00					
	onthly income from a business, profession, or far	m \$ 0.00	Copy here ->	\$	0.00	\$	
6. Net inc	come from rental and other real property	· ———					
			tor 1				
Gross	receipts (before all deductions)	\$ 0.00					
Ordina	ry and necessary operating expenses	-\$ 0.00				_	
Net mo	nthly income from rental or other real property	\$0.00	Copy here ->	\$	0.00	\$	
7. Interes	t, dividends, and royalties			\$	0.00	\$	

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Case number (if known)

						Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unem	ployn	nent compensation			\$	0.00	\$		
			the amount if you contend that the amount ecurity Act. Instead, list it here:	t received was a benef	it under					
	For	you	spouse \$	0.0	00_					
	For	your s	spouse\$							
9.			retirement income. Do not include any am r the Social Security Act.	nount received that was	s a	\$	0.00	\$		
10.	Do not receive	inclued ad as stic ter	n all other sources not listed above. Spede any benefits received under the Social Sa victim of a war crime, a crime against hur rorism. If necessary, list other sources on a	Security Act or paymen manity, or international	ts or					
						\$	0.00	\$		
						\$	0.00	\$		
		Tot	al amounts from separate pages, if any.		+	\$	0.00	\$		
11.			our total current monthly income. Add ling. Then add the total for Column A to the to		\$	4,622.00	+ \$		= \$	4,622.00
Part	2:	Dete	rmine Whether the Means Test Applies t	o You					incom	e
12.	Calcul	ate v	our current monthly income for the year	. Follow these steps:						
		-	our total current monthly income from line 1			Сор	y line 11 l	nere=>	\$	4,622.00
	М	lultiply	by 12 (the number of months in a year)						X	
	12b. TI	he res	sult is your annual income for this part of the	e form				12b.	\$	55,464.00
13.	Calcul	ate th	ne median family income that applies to	you. Follow these step	s:					
	Fill in t	he sta	ate in which you live.	OK						
	Fill in t	he nu	mber of people in your household.	3						
	To find	l a list	edian family income for your state and size of applicable median income amounts, go . This list may also be available at the bank	online using the link sp	ecified	in the separa	ate instruc	13. tions	\$	63,417.00
14.	How d	lo the	lines compare?							
	14a.	_	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	eck box	(1, There is	no presum	ption of abuse).	
	14b.		Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2,	The pr	esumption of	fabuse is	determined by	Form 12	22A-2.
Part	3:	Sign	Below							
	В	y sign	ing here, I declare under penalty of perjury	that the information or	this sta	atement and	in any atta	achments is tru	ie and c	orrect.
	X	/s/ C	Camille Jo Johnson							
	74	Can	nille Jo Johnson ature of Debtor 1							
	Date	Apri	I 8, 2019 / DD / YYYY							
	If		hecked line 14a, do NOT fill out or file Forn	n 122A-2.						
		•	hecked line 14b, fill out Form 122A-2 and f							

Debtor 1 Camille Jo Johnson

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Debtor 1 Camille Jo Johnson Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 10/01/2018 to 03/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Child Development Schools inc

Year-to-Date Income:

Last Year:

Starting Year-to-Date Income: \$12,000.00 from check dated 9/30/2018. Ending Year-to-Date Income: \$24,172.00 from check dated 12/31/2018.

This Year:

Current Year-to-Date Income: \$15,560.00 from check dated 3/31/2019 .

Income for six-month period (Current+(Ending-Starting)): \$27,732.00 .

Average Monthly Income: \$4,622.00

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Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case: 19-11360 Doc: 1 Filed: 04/08/19 Page: 58 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Oklahoma

In 1	re Camille Jo Johnson		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	PENSATION OF ATTORN	EY FOR DI	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy, or	agreed to be paid	to me, for services ren	dered or to
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have receiv	red	\$	1,200.00	
			\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed co	ompensation with any other person unl	ess they are mem	bers and associates of 1	my law firm.
	☐ I have agreed to share the above-disclosed composition copy of the agreement, together with a list of the				w firm. A
5.	In return for the above-disclosed fee, I have agreed to	o render legal service for all aspects of	f the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and re b. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cre d. [Other provisions as needed] Negotiations with secured creditors to re agreements and applications as needed of liens on household goods. 	statement of affairs and plan which manditors and confirmation hearing, and a seduce to market value; exemption p	ny be required; ny adjourned hea olanning; prepa	urings thereof;	affirmation
5.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any disadversary proceeding.			ef from stay actions o	r any other
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of s bankruptcy proceeding.	f any agreement or arrangement for page	yment to me for i	representation of the del	btor(s) in
_	April 8, 2019 Date	/s/ Warren Alarkon Warren Alarkon 2246 Signature of Attorney Stevenson-Kim Alark 1415 NW 43rd St Oklahoma City, OK 7 405 702 7795 Fax: 4 info@skafirm.com Name of law firm	on PLLC 3118		_

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United States Bankruptcy Court Western District of Oklahoma

In re	Camille Jo Johnson	Debtor(s)	Case No. Chapter	7				
	VEDV							
	VERIFICATION OF CREDITOR MATRIX							
The abo	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and corr	ect to the best	of his/her knowledge.				
Date:	April 8, 2019	/s/ Camille Jo Johnson						
		Camille Jo Johnson Signature of Debtor						